



Docket No.: 025444.1059-US02
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Wing-Kee P. Cho

Application No.: 10/699,987

Group Art Unit: 1615

Filed: November 3, 2003

Examiner: H. N. Sheikh

For: EXTENDED RELEASE ORAL DOSAGE
COMPOSITION

TRANSMITTAL LETTER

MS Amendment

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Enclosed are the following items for filing in connection with the above-referenced Patent Application:

1. Fee Transmittal;
2. Amendment Transmittal (in duplicate);
3. Amendment in Response to Non-Final Office Action;
4. Terminal Disclaimer to Obviate a Double Patenting Rejection Over a "Prior" Patent (US Patent 6,709,676);
5. First Supplemental Information Disclosure Statement;
6. Substitute Form PTO/SB08A/B;
7. Eleven cited documents; and

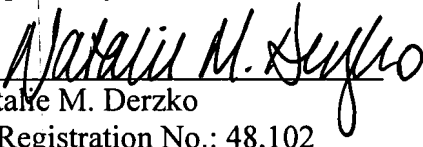
8. Return receipt postcard.

The Director is hereby authorized to charge our Deposit Account 50-0740 in the amount of \$310 for the IDS submission fee (\$180) and the statutory disclaimer fee (\$130). The Director is also authorized to charge any deficiency in the fees filed, asserted to be filed or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Deposit Account No. 50-0740, under Order No. 025444.1059-US02. A duplicate copy of this paper is enclosed.

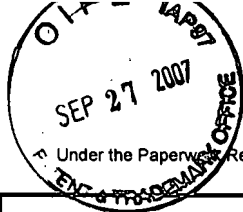
It is not believed that extensions of time or fees for net addition of claims are required beyond those that may otherwise be provided for in documents accompanying this paper. However, if additional extensions of time are necessary to prevent abandonment of this application, then such extensions of time are hereby petitioned under 37 C.F.R. § 1.136(a), and any fees required therefor (including fees for net addition of claims) are hereby authorized to be charged to our Deposit Account No. 50-0740.

Dated: September 27, 2007

Respectfully submitted,

By 
Natalie M. Derzko
Registration No.: 48,102

Paul J. Berman
Registration No.: 36,744
COVINGTON & BURLING LLP
1201 Pennsylvania Avenue, N.W.
Washington, DC 20004-2401
(202) 662-6000
Attorneys for Applicant



Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2007		Complete if Known		
		Application Number	10/699,987-Conf. #5359	
		Filing Date	November 3, 2003	
		First Named Inventor	Wing-Kee P. Cho	
		Examiner Name	H. N. Sheikh	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27	Art Unit	1615		
TOTAL AMOUNT OF PAYMENT	(\$)	310.00	Attorney Docket No.	025444.1059-US02

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card
<input type="checkbox"/> Money Order	<input type="checkbox"/> None
<input type="checkbox"/> Other (please identify):	
<input checked="" type="checkbox"/> Deposit Account	Deposit Account Number: 50-0740
	Deposit Account Name: Covington & Burling LLP
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
	FILING FEES		SEARCH FEES		EXAMINATION FEES		
		Small Entity		Small Entity		Small Entity	
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
2. EXCESS CLAIM FEES							
						Fee (\$)	Small Entity Fee (\$)
Fee Description							
Each claim over 20 (including Reissues)						50	25
Each independent claim over 3 (including Reissues)						200	100
Multiple dependent claims						360	180
Total Claims		Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims		
21 - 79 =		x	=		Fee (\$)	Fee Paid (\$)	
HP = highest number of total claims paid for, if greater than 20.							
Indep. Claims		Extra Claims	Fee (\$)	Fee Paid (\$)			
11 - 18 =		x	=				
HP = highest number of independent claims paid for, if greater than 3.							
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof		Fee (\$)	Fee Paid (\$)		
- 100 =	/50 =	(round up to a whole number) x		=			
4. OTHER FEE(S)							
						Fees Paid (\$)	
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge): 1806 Submission of an Information Disclosure Statement						180.00	
1814 Statutory Disclaimer						130.00	

SUBMITTED BY			
Signature	<i>Natalie M. Derzko</i>	Registration No. (Attorney/Agent)	48,102
Name (Print/Type)	Natalie M. Derzko	Telephone	(202) 662-5301
		Date	September 27, 2007



AMENDMENT TRANSMITTAL LETTER

Docket No.
025444.1059-US02

Application No.
10/699,987-Conf. #5359

Filing Date
November 3, 2003

Examiner
H. N. Sheikh

Art Unit
1615

Applicant(s): Wing-Kee P. Cho

Invention: EXTENDED RELEASE ORAL DOSAGE COMPOSITION

TO THE COMMISSIONER FOR PATENTS

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	21	- 79 =	0	x 50.00	0.00
Independent Claims	11	- 18 =	0	x 200.00	0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify): Submission of an Information Disclosure Statement					180.00
Statutory Disclaimer					130.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					310.00

☒ Large Entity

☐ Small Entity

☐ No additional fee is required for this amendment.

☒ Please charge Deposit Account No. 50-0740 in the amount of \$ 310.00.
A duplicate copy of this sheet is enclosed.


☐ A check in the amount of \$ _____ to cover the filing fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☒ The Director is hereby authorized to charge and credit Deposit Account No. 50-0740
as described below. A duplicate copy of this sheet is enclosed.

☒ Credit any overpayment.

☒ Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.


Natalie M. Derzko
Attorney/Agent Reg. No.: 48,102

Dated: September 27, 2007

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1201 Pennsylvania Avenue, N.W.
Washington, DC 20004-2401
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